# ST BARTHOLOMEW'S SCHOOL MEDICAL CONDITIONS POLICY

# Reviewed by the Governors' Education Committee Autumn 2022 Approved by the Full Governing Body Autumn 2022 To be reviewed Autumn 2024

## **Supporting Students with Medical Conditions**

#### 1. Aims

This policy aims to ensure that:

- This policy meets the requirements under <u>Section 100 of the Children and Families Act 2014</u>, which places a duty on governing boards to make arrangements for supporting students at their school with medical conditions.
- It is also based on the Department for Education's statutory guidance: <u>Supporting pupils at school</u> with medical conditions, updated 2017.
- There are sufficient staff with suitable training so that they are competent to support students with medical conditions.
- That staff understand and can support the delivery of care plans.
- To work with the School Nursing Service and other medical specialists in support of any student with a medical condition.
- To ensure that systems are in place to obtain information about a medical condition and to keep this up to date.
- To ensure that students with medical conditions are actively supported to participate fully in school life.

#### 2. Implementation

Supporting students with medical conditions is a shared responsibility, where a common knowledge and understanding is required across staff. This includes the administration of medicines, which is overseen by the House / Sixth Form Office, in accordance with the First Aid Policy.

Staff who support students with a medical condition must receive sufficient training to achieve the necessary level of competency before they are able to take on a particular role.

Teachers must take into account the medical condition of a student when they are engaging them in learning. All staff must know the appropriate action to take in the event of a student requiring assistance for their medical condition.

## 3. Parents/Carers

Parents / carers must provide sufficient up to date medical information about the student and their medical needs.

The care plan should be drawn up with the parents / carers, the student, House / Sixth Form staff and a medical professional, usually the NHS School Nurse or other medical specialist.

Any agreed action, such as the provision of medicines / equipment to the school must be carried out in order that the agreed care plan can be fully implemented.

#### 4. Equal Opportunities

Where and whenever possible the school will support students with medical conditions to participate fully in school based activities, trips, visits and sporting activities.

Reasonable adjustments will be made in order to allow this participation.

Risk assessments will be carried out and plans put in place in order to support access to be as full as possible. This will be considered with the support of the student, parents / carers and any relevant healthcare professionals.

### 5. Being notified that a student has a medical condition

When the school is notified that a student has a medical condition, the process outlined in Appendix 1 will be followed to decide whether the pupil requires a care plan.

The school will make every effort to ensure that arrangements are put into place within two weeks, or by the beginning of the relevant term for students who are new to our school.

#### 6. Individual Care Plans

The Headteacher has overall responsibility for the development of care plans for students with medical conditions. This has been delegated to Designated Safeguarding Lead, Mr J Bastable.

School developed care plans will be reviewed annually except in cases where parents, carers or health care professionals alert the school to a change in need; in such cases, early reviews will be held so that the care plan reflects the most up to date information. Allergy Action plans drawn up by the School Nursing Service will be updated as school are informed of a change in need, in keeping with the School Nursing Service guidance on these plans.

Plans will be developed with the student's best interests in mind and with their input where appropriate.

For students with Asthma / Allergy action plans, the West Berkshire Proforma as provided by the School Nursing Service will be used. For other needs, the school Healthcare Proforma (appendix 2 – Healthcare Plan) will be used (this is modelled on the DFE Health Care plan template as provided in the linked DFE guidance above). The West Berkshire pro-forma, provided by the School Nursing Service will usually be used. Not all students with a medical condition will require a Care Plan. In instances where it is agreed with parents / carers that a HCP would be inappropriate or disproportionate, a record of this decision and the rationale for it will be kept in the student's school record. This decision will be reviewed if parents, carers or health care professionals alert the school to a change in the level of need.

Where a student has an Education, Health & Care Plan (EHCP) / special educational needs, this would usually be referred to in the Care Plan.

The Care Plan would usually include:

- The medical condition, its triggers, signs, symptoms and treatments;
- The student's resulting needs, including medication (dose, side effects and storage) and other treatments, time, facilities, equipment, testing, access to food and drink where this is used to

manage their condition, dietary requirements and environmental issues, e.g. crowded corridors, travel time between lessons;

- Specific support for the student's educational, social and emotional needs. For example, how absences will be managed, requirements for extra time to complete exams, known as 'Access Arrangements'. The use of rest periods or additional support in catching up with lessons and counselling sessions;
- The level of support needed, including in emergencies. If a student is self-managing their medication, this will be clearly stated with appropriate arrangements for monitoring via the House / Sixth Form office where all medications should be stored during the school day;
- Who will provide this support, their training needs, expectations of their role and confirmation of proficiency to provide support for the student's medical condition from a healthcare professional, and cover arrangements for when they are unavailable;
- Who in the school needs to be aware of the student's condition and the support required;
- Arrangements for written permission from parents and the Headteacher for medication to be administered by a member of staff, or self-administered by the student during school hours;
- Separate arrangements or procedures required for school trips or other school activities outside of the normal school timetable that will ensure the student can participate, e.g. risk assessments;
- Where confidentiality issues are raised by the parent/student, the designated individuals to be entrusted with information about the student's condition should be clear about their role in supporting the student;
- What to do in an emergency, including who to contact, and contingency arrangements.

## 7. Managing medicines

Students who require medication to be taken in school will usually have a detailed Care Plan

Prescription and non-prescription medicines will only be administered at school:

- When it would be detrimental to the student's health or school attendance not to do so and
- Where we have parents' / carers' written consent, including via the use of email. This includes the use of an emergency inhaler for students with asthma and Adrenaline Auto Injector (AAI) for those students with anaphylaxis.

When these medicines have been deposited with the House/ Sixth Form staff with a completed Medicine Administration Consent Form (Appendix 2 of the First Aid Policy). A signed record, which has the date and time of administration must also be completed on each occasion that a student requires medication. Parents need to complete a new consent to administer medicine form (appendix 2) whenever there is a change to dose or method and send this into the school for action Some students may wish to have paracetamol tablets available to them in the House / Sixth Form office. In this case a box must be provided by a parent / carer, which is clearly labelled with the student name / date along with a completed Medication Administration Consent Form (Appendix 2 of the First Aid Policy). Before administering medication for pain relief, staff will first check with the student when the last dose was taken and check the maximum doses guidance.When medication is administered, the correct number of tablets should be given to the student by the member of staff administering the medicines. On no account should the student be given the box of tablets / capsules. Where a liquid medicine is to be taken, the dose should be checked and the student monitored closely whilst they self administer the medicine. The Medication Record (See Appendix 3 of the First Aid Policy) must be completed and the parent / carer contacted so that they are aware of the time / quantity of the medication which has been administered. This may be by telephone or email, with a log noted of the call on the Medication Record.

No medicine containing aspirin will be administered to students under 16 unless prescribed by a doctor for their use.

The House / Sixth Form Office will only accept prescribed medicines that are:

- In-date;
- Labelled with the individual name of the student for whom it is intended;
- Provided in the original container, as dispensed by the pharmacist, and include instructions for administration, dosage and storage.

The school will accept insulin that is inside an insulin pen or pump rather than its original container, but it must be in date.

All medicines will be clearly named and stored safely in the House / Sixth Form Office / Medical Room, where a fridge is available. Students will be informed about where their medicines are at all times and be able to access them immediately. Medicines and devices such as asthma inhalers, blood glucose testing meters and spare adrenaline pens will always be readily available to students under adult supervision from House / Sixth Form offices where these are not carried by the individual.

Where a student with diabetes needs to dispose of needles a sharps bin is available in the Medical Room and House/ Sixth Form Offices where this is a regular place of use by students with this medical condition. Emptying will take place regularly by a company contracted by the school and licensed to deal with hazardous waste.

It is advised that parents collect all medication at the end of each school year and replace it, as needed, in September. Parents should ensure that school have a sufficient supply of medication that is in date, collecting and disposing of expired medication as needed. Termly reminders will be sent out regarding the collection of expired medication, after which any left in school will be disposed of appropriately.

In line with recommendations of good practice, outlined in the Department of Health document: Guidance on the use of adrenaline auto-injectors in schools, September 2017; the school will hold an emergency Adrenaline Auto Injector (AAI) – EpiPen in each House/ Sixth Form Office, in a secure wall mounted box.

This emergency AAI is for use only to a pupil at risk of anaphylaxis, where an AAI is already prescribed and written parental consent for use of the emergency AAI has been provided. The school's emergency AAI can be administered to a pupil whose own prescribed AAI cannot be administered correctly without delay. Thereafter all standard procedures are followed.

The school will also hold an emergency Asthma inhaler – Salbutamol Inhaler in each House / Sixth Form Office, as outlined in the Department of Health Document: Guidance on the use of emergency salbutamol inhalers in schools, March 2015.

The emergency salbutamol inhaler should only be used by students, for whom written parental consent for use of the emergency inhaler has been given, who have either been diagnosed with asthma and prescribed an inhaler, or who have been prescribed an inhaler as reliever medication. The inhaler can be used if the pupil's prescribed inhaler is not available (for example, because it is broken, or empty).

## 8. Students' Medical Information

Medical Information is stored securely in House / Sixth Form Offices. Medical conditions are noted electronically in SIMS.

Medical conditions are also shared with staff by electronically circulating confidential lists, clustered into groups which show the condition together with the student name and picture. This information is updated whenever necessary and at least annually and is flagged as both confidential and sensitive.

# 9. Controlled drugs

<u>Controlled drugs</u> are prescription medicines that are controlled under the <u>Misuse of Drugs Regulations</u> <u>2001</u> and subsequent amendments, such as Buccal (oromucosal) midazolam for epilepsy.

Within school, all controlled drugs will be kept in a secure cabinet in the relevant House / Sixth Form Office. Only named staff have access.Controlled drugs will be easily accessible in an emergency and a record of any doses used and the amount held will be kept.

For trips, where controlled drugs need to be taken out of school, a risk assessment will be completed and a decision made as to if these will be carried by the student or a member of staff with the rationale for any decision made recorded and shared with parents

#### Students managing their own needs

Students who are competent will be encouraged to take responsibility for managing their own medicines and procedures, within the context previously set out in this policy and noted in the First Aid Policy. This will be discussed with parents and it will be reflected in their Care Plans.

Where students are clearly competent to manage their own needs, staff in the House /Sixth Form Office will support this by providing a venue / offering the use of the medical room. An example of this is in the case of those students with diabetes.

Staff must not assume that students with the same medical condition have the same needs.

Where a student becomes unwell in a classroom, they must be accompanied by another person if they are sent to the House / Sixth Form office.

It is clear that medical appointments will be authorized, where they relate to the medical condition and are not available outside school time.

Some medical conditions will mean that students will be allowed to take toilet or other breaks whenever they need to in order to manage their medical condition effectively.

## **10.Emergency procedures**

Staff will follow the school's normal emergency procedures (for example, calling 999). All students' Care Plans will clearly set out what constitutes an emergency and will explain what to do.

If a student needs to be taken to hospital, staff will stay with the student until the parent arrives, or accompany the student to hospital by ambulance.

# 11.Training

Staff who are responsible for supporting students with medical conditions will receive suitable and sufficient training to do so.

The training will be identified during the development or review of Care Plans. Staff who provide support to students with medical conditions will be included in meetings where this is discussed.

The relevant healthcare professionals will lead on identifying the type and level of training required and will agree this with 'Appointed Person' see the First Aid Policy. Training will be kept up to date.

Training will:

- Be sufficient to ensure that staff are competent and have confidence in their ability to support the students;
- Fulfil the requirements in the Care Plans;
- Help staff to have an understanding of the specific medical conditions they are being asked to deal with, their implications and preventative measures.

Healthcare professionals will provide confirmation of the proficiency of staff in a medical procedure, or in providing medication.

All staff will receive training so that they are aware of this policy and understand their role in implementing it, for example, with preventative and emergency measures so they can recognise and act quickly when a problem occurs. This will be provided for new staff during their induction.

In addition, training is planned at least annually for the one and three day courses in order that the numbers and location of staff trained remain at appropriate levels. This is overseen and implemented by the Medical Admin Officer. Qualifications gained are noted on the Sims records of staff and in the appendix 1 to the First Aid Policy, which is updated as required.

# 12.Record keeping

Written records must be kept of all medicine administered to students. Parents / carers will be informed if a student has been unwell at school.

Care plans are stored electronically in SIMS and a hard copy kept in the student's House / Sixth Form Office. All staff are aware of this and reminded regularly.

# 13.Evaluation & Review

Analysis of the accident forms as noted in the First Aid Policy, will enable Governors to analyse and evaluate the success of this policy. Anonymised case studies will also enable Governors to test the effectiveness of Care Plans.

This policy will be reviewed at least every two years by the Education Committee or as necessary due to any changes in guidance.

Agreed by the Full Governing Body at their meeting on 8<sup>th</sup> December, 2022.

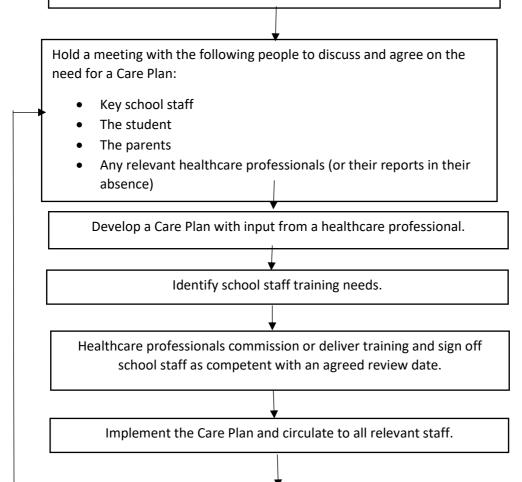
# Appendix 1

Being notified that a student has a medical condition - process

Parent or healthcare professional informs the school that the child:

- Has a new diagnosis
- Is due to attend a new school
- Is due to return to school after a long absence
- Has needs which have changed.

The headteacher or other senior member of staff co-ordinates a meeting to discuss the student's needs and identifies member of staff to support that student.



Review the Care Plan annually or when the student's condition changes. Parents or healthcare professionals will initiate this process.